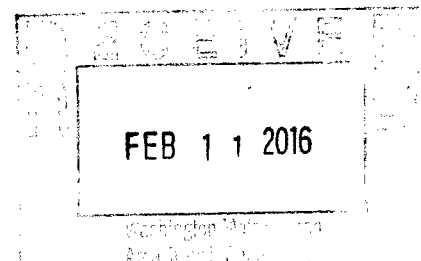


# Washington Metropolitan Area Transit Commission

## 2016 Carrier Annual Report Form

Read the accompanying instructions carefully before completing this form.



### 1. CARRIER INFORMATION:

1726	Nova Tours & Travel, Inc.			
*WMATC No. *Name of Carrier (as shown on certificate of authority)				
19801 Executive Park Circle		Germantown	MD	20874-2649
*Street Address of Principal Place of Business	Apt./Suite	City	State	Zip
Mailing Address (if different from street address)	Apt./Suite	City	State	Zip
(301) 515-0852	(301) 526-4586	(301) 515-0854	novatourusa@verizon.net	
*Telephone	Other Telephone	Fax	E-mail	

### 2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

1967501			4197
USDOT No.	DCTC No.	Virginia DMV passenger carrier No.	Maryland PSC No.

### 3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Mr. Daniel T. Lee	Managing Director		
*Name	*Title		
(301) 515-0852	(301) 526-4586	(301) 515-0854	novatourusa@verizon.net
*Telephone	Other Telephone	Fax	E-mail

### 4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

\*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria, Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see [www.wmatc.gov](http://www.wmatc.gov).

Name of Registered Agent for Service of Process	Telephone	E-mail		
Agent Address (must be inside Metropolitan District)	Apt./Suite	City	State	Zip

5. **\*CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

6. **\*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below or (2) attach a complete vehicle list to both pages of this form. If you have more than 10 vehicles in your fleet, you must use option 2. Include **all** required information.

Fleet No. If applicable	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Plate Number	*State Registered	*Seating Capacity	Wheelchair Lift or Ramp Yes/No
720	2015	Prevost	2PCH33A98FC712973	02AP50	MD	56	NO
721	2012	Prevost	2PCH33A95CC711887	019P96	MD	56	NO
722	2006	Prevost	2PCH33A988C711129	017P90	MD	56	NO
723	2006	Prevost	2PCH33A966L010596	017P41	MD	56	NO
724	1998	VanHool	YE2TC618TN20A3163	026P30	MD	56	NO
725	2011	Mercedes	WDZPE8CD5B5591536	030P11	MD	15	NO
726	2013	Freightliner	1FVACXBS8DHB N8916	02AP20	MD	34	NO
727	2014	Ford	3FRNF6FL7DV016821	027P30	MD	31	NO

7. **\*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me or under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Daniel Lee  
NOVA TOURS & Travel Inc  
 \*Name (type or print)

  
 \*Signature

Managing Director  
 \*Title (not required for sole proprietors)

2/9/2016  
 \*Date